

**Texas**

**Railroad Commission of Texas (RRC)**

**Re: 7520 Reports for the Fourth Quarter of FY2013**

**4<sup>th</sup> Quarter Period: (October 1, 2012 --- September 30, 2013)**

**Date: (Wednesday) October 30, 2013**

**Time: 3:02pm**

**Reference File**

**Code: WA-UI-PP**

BARRY T. SMITHERMAN, CHAIRMAN  
DAVID PORTER, COMMISSIONER  
CHRISTI CRADDICK, COMMISSIONER



GIL BUJANO, P.E.  
DIRECTOR, OIL AND GAS DIVISION  
DOUG O. JOHNSON, P.E.  
ASSISTANT DIRECTOR, TECHNICAL PERMITTING

# RAILROAD COMMISSION OF TEXAS

## OIL AND GAS DIVISION

October 30, 2013

MR. OMAR MARTINEZ  
SOURCE WATER PROTECTION (6WQ-SG)  
U. S. ENVIRONMENTAL PROTECTION AGENCY  
1445 ROSS AVENUE  
DALLAS TX 75202-2733


Re: UIC Federal Reporting  
4thd Quarter Federal FY 2013

Dear Mr. Martinez,

The UIC Federal Reporting Forms for the Railroad Commission's UIC program for the fourth quarter of federal fiscal year 2013 are attached.

If you have any questions, please email [susan.moore@rrc.state.tx.us](mailto:susan.moore@rrc.state.tx.us) or call 512-463-6820.

Sincerely,



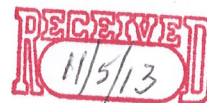
Doug O. Johnson P.E.  
Assistant Director for  
Technical Permitting

DJ/sam


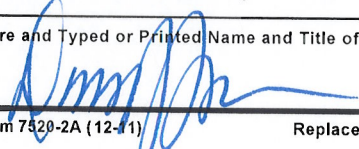
Attachments


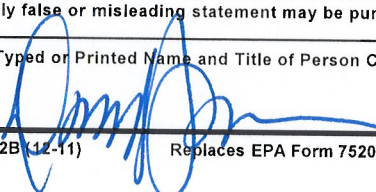
Cc: Mr. Ray Leissner  
Source Water Protection (6WQ-AT)  
U. S. Environmental Protection Agency  
1445 Ross Avenue  
Dallas TX 75202-2733


**Reference File  
Code: WA-UI-PP**



United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460 <b>EPA</b> <b>UIC Federal Reporting System</b> <b>Part I: Permit Review and Issuance/</b> <b>Wells in Area of Review</b> (This information is solicited under the authority of the Safe Drinking Water Act)					<b>I. Name and Address of Reporting Agency</b>  United States Environmental Protection Agency						
<b>II. Date Prepared (month, day, year)</b> 10/30/2013		<b>III. State Contact (name, telephone no.)</b> Doug Johnson 512-463-6760		<b>IV. Reporting Period (month, year)</b> From <b>October 1, 2012</b> To <b>09/30/2013</b>							
<b>Item</b>					<b>Class and Type of Injection Wells</b>						
					I	II			III	IV	V
						SWD 2D	ER 2R	HC 2H			
<b>V. Permit Application</b> Number of Permit Applications Received						748	1735	2	8		
<b>VI. Permit Determination</b>	<b>Permit Issued</b>	<b>A</b>	Number of Individual Permits Issued (One Well)	New Wells		509	0	0	0		
			Existing Wells		0	0	0	0			
		<b>B</b>	Number of area Permits* Issued (Multiple Wells) (*See instructions on back)	New Well Field		0	1395	0	0		
			Existing Well Field		0	0	0	0			
	<b>C</b>	Number of Wells in Area Permits (See B above)	New Wells		0	2121	0	0			
			Existing Wells		0	0	0	0			
	Permit Not Issued	D	Number of Permits Denied/Withdrawn (after complete technical review)		77	107	0	0			
	Modification Issued	E	Number of Major Permit Modifications Approved		----	747	0	0			
<b>VII. Permit File Review</b>	Number of Rule-Authorized Class II Wells Reviewed			Wells Reviewed		----	41808	722	125		
				Wells Deficient		NA	NA	NA	NA		
<b>VIII. Area of Review (AOR)</b>	<b>Wells Reviewed</b>	<b>A</b>	Number of Wells in Area of Review	Abandoned Wells		**	**	**	**		
			Other Wells		----	11698	0	0			
	<b>Wells Identified for C/A</b>	<b>B</b>	Number of Wells Identified for Corrective Action	Abandoned Wells		----	0	0	0		
			Other Wells		----	0	0	0			
	<b>Wells with C/A</b>	<b>C</b>	1. Number of Wells in AOR with Casing Repaired/Recemented C/A		0	0	0	0			
			2. Number of Active Wells in AOR Plugged/Abandoned		0	0	0	0			
			3. Number of Abandoned Wells in AOR Replugged		----	5	0	0			
			4. Number of Wells in AOR with "Other" Corrective Action		----	84	0	0			
<b>IX. Remarks/Ad Hoc Report (Attach additional sheets if necessary)</b> **= included with other wells; NA - deficiencies are noted on Part II, V.A.											
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.											
Signature and Typed or Printed Name and Title of Person Completing Form 								Date 10/30/2013		Telephone No. (512) 463-6760	

 <p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p><b>UIC Federal Reporting System</b> <b>Part II: Compliance Evaluation</b></p> <p>(This information is solicited under the authority of the Safe Drinking Water Act)</p>				<b>I. Name and Address of Reporting Agency</b>  United States Environmental Protection Agency <div style="border: 1px solid black; height: 40px; width: 100%;"></div>																
<b>II. Date Prepared (month, day, year)</b> 10/30/2013			<b>III. State Contact (name, telephone no.)</b> Doug Johnson 512-463-6760			<b>IV. Reporting Period (month, year)</b> From <b>October 1, 2012</b> To <b>September 30, 2013</b>														
										<b>Class and Type of Injection Wells</b>										
												<b>II</b>								
										<b>I</b>	<b>SWD 2D</b>	<b>ER 2R</b>	<b>HC 2H</b>	<b>III</b>	<b>IV</b>	<b>V</b>				
<b>V. Summary of Violations</b>	<b>Total Wells</b>	<b>A</b>	<b>Item</b>																	
	<b>Total Violations</b>	<b>B</b>	1. Number of Wells with Violations																	
			1. Number of Unauthorized Injection Violations																	
			2. Number of Mechanical Integrity Violations																	
			3. Number of Operation and Maintenance Violations																	
			4. Number of Plugging and Abandonment Violations																	
			5. Number of Monitoring and Reporting Violations																	
6. Number of Other Violations (Specify) Comp/Oper Violations																				
<b>VI. Summary of Enforcement</b>	<b>Total Wells</b>	<b>A</b>	Number of Wells with Enforcement Actions																	
	<b>Total Enforcement Actions</b>	<b>B</b>	1. Number of Notices of Violation																	
			2. Number of Consent Agreements																	
			3. Number of Administrative Orders																	
			4. Number of Civil Referrals																	
			5. Number of Criminal Referrals																	
			6. Number of Well Shut-Ins																	
			7. Number of Pipeline Severances																	
8. Number of Other Enforcement Actions (Specify) Pmts Susp/Canc																				
<b>VII. Summary of Compliance</b>	<b>Number of Wells Returned to Compliance</b>		<b>A. This Quarter</b>																	
			<b>B. This Year</b>																	
<b>VIII. Contamination</b>	<b>Number of Cases of Alleged Contamination of a USDW</b>																			
<b>IX. MIT Resolved</b>	<b>Percent of MIT Violations Resolved in 90 Days</b>																			
<b>X. Remarks/Ad Hoc Report (Attach additional sheets)</b> Some wells have multiple violations																				
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.																				
Signature and Typed or Printed Name and Title of Person Completing Form 										<b>Date</b> 10/30/2013				<b>Telephone No.</b> (512) 463-6760						

 <b>United States Environmental Protection Agency</b> Office of Ground Water and Drinking Water Washington, DC 20460 <b>UIC Federal Reporting System</b> <b>Part II: Compliance Evaluation</b> <b>Significant Noncompliance</b> (This information is solicited under the authority of the Safe Drinking Water Act)				<b>I. Name and Address of Reporting Agency</b> United States Environmental Protection Agency <div style="border: 1px solid black; height: 60px; width: 100%;"></div>							
<b>II. Date Prepared (month, day, year)</b> 10/30/2013			<b>III. State Contact (name, telephone no.)</b> Doug Johnson 512-463-6760			<b>IV. Reporting Period (month, year)</b> From <b>October 1, 2012</b> To <b>09/30/2013</b>					
				<b>Class and Type of Injection Wells</b>							
				I	II SWD 2D	ER 2R	HC 2H	III	IV	V	
<b>V. Summary of Significant Non-Compliance (SNC)</b>	Total Wells	A	Number of Wells with SNC Violations	0	6,384	0	0				
	Total Violations	B	1. Number of Unauthorized Injection SNC Violations	—	11	0	0				
			2. Number of Mechanical Integrity SNC Violations	—	6,303	0	0				
			3. Number of Injection Pressure SNC Violations	—	70	0	0				
			4. Number of Plugging and Abandonment SNC Violations	—	0	0	0				
			5. Number of SNC Violations of Formal Orders	0	0	0	0				
			6. Number of Falsification SNC Violations	0	0	0	0				
			7. Number of Other SNC Violations (Specify)	—	0	0	0				
<b>VI. Summary of Enforcement Against SNC</b>	Total Wells	A	Number of Wells with Enforcement Actions Against SNC	14	2,951	0	0				
	Total Enforcement Actions	B	1. Number of Notices of Violation	—	2,051	0	0				
			2. Number of Consent Agreements/Orders	12	8	0	0				
			3. Number of Administrative Orders	1	3	0	0				
			4. Number of Civil Referrals	1	3	0	0				
			5. Number of Criminal Referrals	0	0	0	0				
			6. Number of Well Shut-ins	—	72	0	0				
			7. Number of Pipeline Severances	—	814	0	0				
8. Number of Other Enforcement Actions Against SNC Violations (Specify)	0	0	0	0							
<b>VII. Summary of Compliance</b>	Number of Wells in SNC Returned to Compliance		A. This Quarter	—	1,666	—	—				
			B. This Year	—	5,789	—	—				
<b>VIII. Contamination</b>	Number of Cases of Alleged Contamination of a USDW		0	0	0	0					
<b>IX. Well Closure</b>	Class IV/Endangering Class V Well Closures		Involuntary Well Closure				—	—			
			Voluntary Well Closure				—	—			
<b>Certification</b> I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.											
Signature and Typed or Printed Name and Title of Person Completing Form 						Date 10/30/2013		Telephone No. (512) 463-6760			

 <p>United States Environmental Protection Agency Office of Ground Water and Drinking Water Washington, DC 20460</p> <p><b>UIC Federal Reporting System</b> <b>Part III: Inspections</b> <b>Mechanical Integrity Testing</b> (This information is solicited under the authority of the Safe Drinking Water Act)</p>				<p><b>I. Name and Address of Reporting Agency</b></p> <p>United States Environmental Protection Agency</p>					
<p><b>II. Date Prepared (month, day, year)</b></p> <p>10/30/2013</p>		<p><b>III. State Contact (name, telephone no.)</b></p> <p>Doug Johnson 512-463-6760</p>		<p><b>IV. Reporting Period (month, year)</b></p> <p>From <b>October 1, 2012</b> To <b>09/30/2013</b></p>					
				<p><b>Class and Type of Injection Wells</b></p>					
				I	II	III	IV	V	
				SWD 2D	ER 2R	HC 2H			
<b>V.</b> Summary of Inspections	Total Wells	A	Number of Wells Inspected	—	30,318	0	93		
	Total Inspections	B	1. Number of Mechanical Integrity Tests (MIT) Witnessed	—	6,601	0	93		
			2. Number of Emergency Response or Complaint Response Inspections	—	475 *	—			
			3. Number of Well Constructions Witnessed	3976	**	**	**	**	
			4. Number of Well Pluggings Witnessed	8045	**	**	**	**	
			5. Number of Routine/Periodic Inspections	—	23,242	—			
<b>VI.</b> Summary of Mechanical Integrity  (MI)	Total Wells	A	Number of Wells Tested or Evaluated for Mechanical Integrity (MI)	—	24,464	765	153		
		B	No. of Rule-Authorized Wells Tested/Evaluated for MI	Passed 2-part test	NA	NA	NA	NA	
	Failed 2-part test		NA	NA	NA	NA			
	For Significant Leak	C	1. Number of Annulus Pressure Monitoring Record Evaluations	Well Passed	**	**	0	0	
				Well Failed	**	**	0	0	
			2. No. of Casing/Tubing Pressure Tests	Well Passed	—	19,374	0	97	
				Well Failed	—	1,059	0	0	
			3. Number of Monitoring Record Evaluations	Well Passed	—	0	569	28	
				Well Failed	—	0	0	0	
			4. No. of Other Significant Leak Tests/Evaluations (Specify)	Well Passed	—	0	98	0	
				Well Failed	—	0	0	0	
	For Fluid Migration	D	1. Number of Cement Record Evaluations	Well Passed	—	3,999	—		
				Well Failed	—	0	0	0	
			2. Number of Temperature/Noise Log Tests	Well Passed	—	29	0	0	
Well Failed				—	0	0	0		
3. No. of Radioactive Tracer/Cement Bond Tests			Well Passed	—	3	0	0		
			Well Failed	—	0	0	0		
4. No. of Other Fluid Migration Tests/Evaluations (Specify)			Well Passed	—	0	98	28		
			Well Failed	—	0	0	0		
<b>VII.</b> Summary of Remedial Action	Total Wells	A	Number of Wells with Remedial Action	—	***	0	0		
	Total Remedial Actions	B	1. Number of Casing Repaired/Squeeze Cement Remedial Actions	—	***	0	0		
			2. Number of Tubing/Packer Remedial Actions	—	***	0	0		
			3. Number of Plugging/Abandonment Remedial Actions	—	***	0	0		
			4. Number of Other Remedial Actions (Specify)	—	***	0	0		

**VIII. Remarks/Ad Hoc Report** (Attach additional sheets) \*From daily inspector reports; \*\*NA for UIC wells only, total for all well types; \*\*\*NA data

**Certification**

I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature and Typed or Printed Name and Title of Person Completing Form

Date

10/30/2013

Telephone No.

(512) 463-6760



United States Environmental Protection Agency  
Office of Ground Water and Drinking Water  
Washington, DC 20460

**UIC Federal Reporting System  
Part IV: Quarterly Exceptions List**

(This information is collected under the authority of the Safe Drinking Water Act)

OMB No. 2040-0042  
Approval expires 11/30/2014

**I. Reporting Period**

From  
10/01/2012

To  
09/30/2013

II. Well Class and Type	III. Name and Address of Owner/Operator	IV. Well ID No. (Permit No.)	V. Summary of Violations								VI. Summary of Enforcement								VII. Date Compliance Achieved	
			Date of Violation	Mark ('X') Violation Type							Date of Enforcement	Mark ('X') Enforcement Type								
				Unauthorized Injection	Well Mechanical Integrity	Injection Pressure	Plugging and Abandonment	Formal Order	Falsification	Other (Specify)		Notice of Violation	Consent Agreement	Administrative Order	Civil Referral	Criminal Referral	Well Shut-in	Pipeline Severance	Other (Specify)	
	NONE																			

**Certification**  
I certify that the statements I have made on this form and all attachments thereto are true, accurate, and complete. I acknowledge that any knowingly false or misleading statement may be punishable by fine or imprisonment or both under applicable law.

Signature of Person Completing Form

Typed or Printed Name and Title

Doug Johnson, Assistant Director, Technical Permitting

Date

10/30/2013

Telephone No.

(512) 463-6760